



STATE OF MARYLAND

DHMH

Maryland State Board of Dental Examiners

Maryland Department of Health and Mental Hygiene

Spring Grove Hospital Center • Benjamin Rush Building
55 Wade Avenue/Tulip Drive • Catonsville, Maryland 21228

Larry Hogan, Governor - Boyd Rutherford, Lt. Governor - Van Mitchell, Secretary

March 29, 2016

Randall R. Yazhary, DDS
c/o Edwin L. Keating, III
Baxter, Baker, Sidle, Conn & Jones, P.A.
Attorneys at Law
120 E. Baltimore Street, Suite 2100
Baltimore, MD 21202-1643

Re: Case Numbers: 2010-249 & 2011-261
Letter of Surrender

Dear Dr. Yazhary:

Attached is the signed Letter of Surrender, with an effective date of March 29, 2016.

Very truly yours,

Sharon J. Oliver, MBA
Compliance Manager

Enclosure

cc: Robert J. Gilbert, Deputy Counsel, HOPL
Ronald F. Moser, DDS, Board President
Grant Gerber, AAG, Board Counsel
Tony W. Torain, JD, Executive Director

Randall R. Yazhary, D.D.S.
1334 Lawson Lane
McLean, VA 21

Date: 03/29/2016

Ronald F. Moser, D.D.S., President
Maryland State Board of Dental Examiners
Spring Grove Hospital Center
Benjamin Rush Building
55 Wade Avenue/Tulip Drive
Catonsville, Maryland 21228

RE: Permanent Surrender of License to Practice Dentistry
License Number: 11517
Case Numbers: 2010-249, 2011-261

Dear Dr. Moser and Members of the Board:

Please be advised that I have decided to **PERMANENTLY SURRENDER** my license to practice dentistry in the State of Maryland, License Number 11517, effective immediately. I understand that upon surrender of my license, I may not give dental advice or treatment to any individual, with or without compensation, and cannot prescribe medications or otherwise engage in the practice of dentistry in the State of Maryland as it is defined in the Maryland Dentistry Act (the "Act"), Md. Code Ann., Health Occ. I ("Health Occ. I") §§ 4-101 *et seq.* (2014 Repl. Vol.), and other applicable laws. In other words, as of the effective date of this Permanent Letter of Surrender, I understand that the permanent surrender of my license means that I am in the same position as an unlicensed individual in the State of Maryland.

I understand that this Permanent Letter of Surrender is a **PUBLIC DOCUMENT** and on the Board's acceptance, becomes a **FINAL ORDER** of the Board.

My decision to permanently surrender my license to practice dentistry in the State of Maryland has been prompted by an investigation of my license by the Maryland State Board of Dental Examiners (the "Board"). The results of the investigation led to the Board's issuance of disciplinary charges on September 2, 2015, under Case Nos. 2010-249 and 2011-261, for allegedly violating a Consent Order dated February 2, 2015, (the "2015 Consent Order").

Specifically, the Board charged me, pursuant to Health Occ. I § 4-315(a)(33) (hereinafter the "Act"), with failing to comply with a Board Order which required that pursuant to the terms of the 2015 Consent Order (Condition 5), i.e., that I take and pass the ADEX examination on or before August 2, 2015. I acknowledge that I did not take



and pass the ADEX examination within that time period and therefore did not comply with the 2015 Consent Order and the Act. I did, however, subsequently take and pass the ADEX examination on November 24, 2015.


I have decided to submit this Permanent Letter of Surrender of my license to practice dentistry in the State of Maryland in lieu of further prosecution under the Act as a result of my violation of the 2015 Consent Order. I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Permanent Letter of Surrender. I acknowledge that if the case were to proceed to an evidentiary hearing the Board would be able to prove by a preponderance of the evidence that I did not take the ADEX examination by August 2, 2015, in violation of Condition 5 of that Consent Order and the Act.

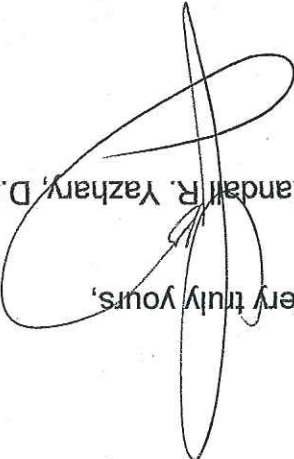
I understand that by executing this Permanent Letter of Surrender I am waiving any right to contest the charges under the 2015 Consent Order in a formal evidentiary hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and all other substantive and procedural protections provided by law, including the right to appeal.

I understand that the Board will advise the National Practitioners' Data Bank of this Permanent Letter of Surrender, and in any response to any inquiry, that I have permanently surrendered my license in lieu of further prosecution action under the Act. I also understand that in the event I would apply for license in any form in any other state or jurisdiction, that this Permanent Letter of Surrender and the public documents related to it may be released or published by the Board to the same extent as a final order that would result from disciplinary action, pursuant to Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2014). I further understand that my decision to enter into this permanent letter of surrender is as a result of the aforementioned Board disciplinary action.

I acknowledge that upon the Board's acceptance of this Permanent Letter of Surrender, I shall present to the Board my original Maryland dental license number 11517, and my most recent wallet-sized renewal card.

I acknowledge that I may not rescind this Permanent Letter of Surrender in part or in its entirety for any reason whatsoever. I further agree that I will never apply for dental licensure in the State of Maryland. Finally, I wish to make clear that I have been advised of my right to be represented by the attorney of my choice throughout proceedings before the Board, including the right to counsel with an attorney prior to signing this Permanent Letter of Surrender. I understand both the nature of the Board's actions and this Permanent Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Permanent Letter of Surrender. I voluntarily choose to permanently surrender my Maryland license to practice dentistry pursuant to the terms and conditions set out herein. I make this decision knowingly and voluntarily.

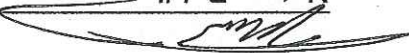


Very truly yours,

Randall R. Yazhary, D.D.S.
NOTARY

STATE OF Virginia
CITY/COUNTY OF Fairfax

I HEREBY CERTIFY that on this 1st day of March, 2016,
before me, a Notary Public of the State and City/County aforesaid, personally appear
Randall R. Yazhary, D.D.S., and declared and affirmed under the penalties of perjury
that signing the foregoing Letter of Surrender was his voluntary act and deed.

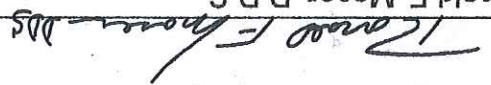
AS WITNESS my hand and Notarial seal.


Notary Public

My Commission expires: 12-31-2018
MATHEW CALLAHAN THOMAS
NOTARY PUBLIC 7620651
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES 12-31-2018

ACCEPTANCE

On this 29th day of March, 2016, I, Ronald F. Moser,
D.D.S., on behalf of the Maryland State Board of Dental Examiners, accept Randall R.
Yazhary, D.D.S.'s **PERMANENT SURRENDER** of his license to practice dentistry in the
State of Maryland.


Ronald F. Moser, D.D.S.
President
Maryland State Board of Dental Examiners